| Electronic Patent Application Fee Transmittal    |     |  |          |        |                      |  |  |
|--|-----|--|----------|--------|----------------------|--|--|
| Application Number:                              | 105 | 10507525   |          |        |                      |  |  |
| Filing Date:                                     | 14- | 14-Sep-2004  |          |        |                      |  |  |
| Title of Invention:                              | Мо  | Modified-release tablet of bupropion hydrochloride |          |        |                      |  |  |
| First Named Inventor/Applicant Name:             | We  | Werner Oberegger                                   |          |        |                      |  |  |
| Filer:   | Rol | Robin Lyn Teskin./Stacey Buckner                   |          |        |                      |  |  |
| Attorney Docket Number:                          | 540 | 54030US  |          |        |                      |  |  |
| Filed as Large Entity                            |     |  |          |        |                      |  |  |
| U.S. National Stage under 35 USC 371 Filing Fees |     |  |          |        |                      |  |  |
| Description                                      |     | Fee Code   | Quantity | Amount | Sub-Total in USD(\$) |  |  |
| Basic Filing:                                    |     |  |          |        |                      |  |  |
| Pages:   |     |  |          |        |                      |  |  |
| Claims:  |     |  |          |        |                      |  |  |
| Miscellaneous-Filing:                            |     |  |          |        |                      |  |  |
| Petition:  |     |  |          |        |                      |  |  |
| Patent-Appeals-and-Interference:                 |     |  |          |        |                      |  |  |
| Request for oral hearing                         |     | 1403   | 1        | 1000   | 1000                 |  |  |
| Post-Allowance-and-Post-Issuance:                |     |  |          |        |                      |  |  |
| Extension-of-Time:                               |     |  |          |        |                      |  |  |

| Description    | Fee Code          | Quantity | Amount | Sub-Total in<br>USD(\$) |
|----------------|-------------------|----------|--------|-------------------------|
| Miscellaneous: |                   |          |        |                         |
|                | Total in USD (\$) |          |        | 1000                    |